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WASHINGTON, DC 20005-3096				(Depositor's name)		
CUSTOMER NO.: 20277				(Signature)		
			<u>_</u>			(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	R AT	TORNEY DOCKET NO.	CONFIRMATION NO.
09/694,653 10/23/2000 TITLE OF INVENTION: FLATS MAIL AUTOTRAYER SYSTEM		John Overman	G	63288-253		
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FE	E TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$0	\$1400	01/16/2007
EXAM	INER	ART UNIT	CLASS-SUBCLASS			
FOX, CHARLES A 3652		3652	414-788100	12/19/200	36 HMARZI2 0000903	1 500417 09694653
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the	patent front page, list	11 14UDMED	RMOTT WILL &
Change of corresponded Address form PTO/SB	ondence address (or Cha 1/122) attached.	nge of Correspondence	1	o 3 registered patentials vely,	_	EMERY LLP
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
BOWE BELL + HOWELL POSTAL SYSTEMS COMPANY WHEELING, ILLINOIS						
Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🕱 Corporation or other private group entity 🚨 Government						
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.						
Dublication Fee (No small entity discount permitted) Description Properties and						
Advance Order - # of Copies Two The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 5004/17 (enclose an extra copy of this form						ficiency, or credit any n extra copy of this form).
5. Change in Entity Status (from status indicated above)						
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						
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Authorized Signature	5n. K. S	ul		Date	December 18,	2006
	Brian K.				51,321	
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.						
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